1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1

491 457 At times, one comes across an unusually good road system in what would at first seem to be an isolated area and learns, as in the case of the area south of Volos, that emigrants from these communities, who went to Egypt, sent back large sums of money for the construction of these roads, which were built at heavy cost per kilometer because of the great amount of masonry work needed. Near Xourichti, in this same area, we 443 came across a small unpadlocked building on the main road connected by a path with the village seen in the distance. We learned that this was the place where villagers left their money and orders for purchases desired from Volos. When a truck driver passed that way he would stop, pick up the money and the orders, and do the necessary shopping in Volos. When he came back he would leave the purchases in the little house, perhaps toot his horn or flash his lights, and people from the village would come to get [577] their new possessions. There were no thefts, no shortchanging, in this area of mutual trust where, before World War II, it was safe for a young woman to walk anywhere through the mountains at night unattended.

491 178 In Epirus, across Greece from this Volos area, life is lived in a different historical and physical setting. In order to learn what effect a new road had upon village people there, we went to the village of Tsepelovo. On August 20, 1952 — only a few months prior to our visit — the first automobile had arrived at the village, using the road that had been built to open up a large forest to be exploited for the people's benefit. As we sat in the office of the community council and talked to the village secretary, we learned what the road had already accomplished for this village. The [494] first advantage mentioned was the lowered transportation costs, for the [804] hauling charges per oka (2.8 pounds) by truck are only one fifth or one fourth of those by donkey. When pressed to give other results, the secretary put it this way:

[342] Now we can build homes with sand and cement; formerly it was too expensive to carry these in by animals. Formerly we built our stone houses with lime and mud as mortar, and that is why they tend to crumble so quickly. [438] Here we produce about 14,000 okas (about 20 tons) of walnuts each year. We received little for them because of the transportation charges; now the merchant comes here in a truck and pays us cash and gives a higher price. Today we can also sell our lumber because, before the road came, we couldn't very well strap long boards to the donkeys.

[484] We used to spend twelve-and-a-half hours going by animal to Ioannina, the only large city nearby. Now we do it in two-and-a-half hours by car. The grocer [735] can sell fresh goods, whereas formerly he had only staples. Although we had great riches here, we also had great poverty so that beggars would go from house to house. The road reduces this inequality. Many of our men who had no other income earned much money working on the construction.

[758] In case we get sick we can be carried down by car and not have to ride a donkey.

1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1

donkey. Now we[1] can get the Athens newspapers on the same day they are published, whereas before they would always be at least two days late and frequently more. We have no illiterates here, so many subscribe to these papers.

Considerable insight into what living on a good road means was gained from talking with mountain people who had been resettled in the lowlands away from their destroyed villages. One woman mentioned the advantages with little hesitation, beginning with the access to medical treatment mentioned above: "Here medical care is available because of the road. If a child gets appendicitis, he can get to a doctor in time; in our village up above he would have died. Also woman's work is lighter here. The children are better off. They can go to the school right here in the village whereas in our location up above they had to walk from two to three hours every day."

A commandant of police brought out some interesting examples of what a road means to a village by comparing his community, which got a road ten years before, with another community not far away which was not yet on a road:

The road brought many economic changes. For instance, my father had three hundred cherry trees which he had never bothered to fence in, prune, or tend in any way. Anybody could come and eat the fruit; they would break the branches. But when the road was built, my father fenced in the land and sold the cherries. The income began coming in. Also, it was a disgrace in our village to sell a chicken, but when the road came the women began to sell both eggs and chickens. This meant more income. Eggs in the village without a road sell for half the price obtained by the women in my village. This holds true for all products.

In the village without a road you would have a hard time finding a man with enough cash to buy a candle to light in church, while in my village people always seem to have some cash. In the other village each farmer needs a donkey for transportation and will spend about two thousand drachmas a year just for the upkeep of the donkey; in our village we do not need donkeys because we can use the trucks at much less expense.

Politically, too, roads make a difference. The candidates for parliament seldom get to the villages off the road but try to visit the rest; the same holds true for government officials in position to help in agriculture or other ways. They stick pretty much to the villages which they can easily reach.

The roads that lead into and out of the plateia do more than bring in the welcome buses, trucks, and occasional private cars; they bring in new services, new ideas, better teachers, and increased economic opportunities. People begin to feel that their village has moved from the shadow of isolation into the Greek sunlight.

[1] [i.e., the village of Tsepelovo - Analyst.]

1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1

reveal only some of the traits of the husband-wife relationship in rural Greece. It is equally important to see how this partnership operates day by day, season by season, year by year, for it is in the sharing of a common life, with its hardships and flashing joys, that this companionship based on mutual respect is fashioned. Great is the wife's satisfaction if her husband is considered a good provider. If he is, people say: "Tes dinei tou pouliou to gala" (He brings the bird's milk to her), or "Kai tou pouliou to gala echei" (She even has the milk of the bird). Such phrases go back to the practice of serving eggs beaten in milk to the sick, thereby showing that good care is being taken.

The wife, in addition to watching her own behavior toward her husband, is also responsible for seeing that the children are respectful. The lessons learned in the younger years tends to persist through adolescence into adulthood. Once while sitting at a meal in a Greek home I noticed the young man leave the table. Curious about his exit, I asked: "Where is Petros going?" The father, with a pleased look on his face, said: "He is going out to smoke a cigarette. He does not smoke in front of me." And wherever I went I asked young men singly or in groups whether or not they smoked in the presence of their fathers and found only a small fraction that broke this taboo. To be sure, in some villages and in some homes the young man no longer takes a trek outside if he wants a smoke, but he knows he is going against an old established custom. In one group of nineteen young men, for instance, only three said they would smoke in front of their fathers; in another group of twenty-eight, again only three said they would do so.

The son also shows respect for his father by not going to the same coffeehouse where his father is or is apt to go, but there are regional variations. In villages of the Pelion (near Volos, Thessaly) a man may take his son or even his wife to the coffeehouse, but in the words of the commandant of gendarmerie there "they may act this way near Volos but in my village in Boeotia it would be a great shame if the father and his son were in the same coffeehouse, and no woman would think of entering." As a general rule, even fewer of the young men would accompany their fathers to a coffeehouse than would smoke in their presence. In some of the smaller villages the people say that they do not have enough cafés and so the possibility of the two generations staying apart is not very great.

But on every hand there are signs that the formal etiquette governing respect is breaking down. One well-informed official near Salonica said, "The basic Greek tradition of showing respect for elders is weakening. Now you see boys teaching their fathers how to play backgammon and cards. In the United States you would think this fine but over here our system is patriarchal, and the young American starts life outside the home at an earlier age." A folklorist pointed out that in the past the reverence for Greek customs was looked on as necessary for national survival, especially under the Turks and when people were isolated.

1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1

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have not reached. They also help in the gathering of olives, grapes, and many other products requiring patient labor.

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The woman is increasingly being viewed today as a supplementary source of labor in the fields, to be employed only when the need is urgent, although regional variations are still important. When she does go to the field, she may take the baby and the small children along and care for them as she works. Various explanations are offered for this lightening of field labor by women. Today, more of the village women have seen how the city women live and have resolved to put city ways into practice in their homes and villages. Furthermore, men seem to be showing more interest in their farms due to the help the government is giving in providing fruit trees, opening up of farm-to-market roads, and helping the peasant participate more actively in the national economy. Agricultural and home-economics extension workers, who now visit the majority of villages, not only tell the men that it is their job to do the field work, but they also show the men better methods for reducing the work load. Where tractors exist, the woman is relieved of much field work and can occupy herself with other tasks. She works more on her loom, takes care of her children, and cleans her house. She also has more time for gardening on a plot fairly close to the house. One recognizes the need for this in a place such as Ioannina (Epirus) where peasants in the outlying villages, with plenty of land near their house, buy at the city market vegetables which they could have grown at home if the women had had sufficient time.

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Keeping the Family Well

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Work, however, is not the only responsibility of a Greek housewife. Any ailing person becomes the immediate concern of the mother or the mother-in-law, with the older woman usually considered wiser in the mysteries of folk medicine. The patient also becomes the concern of the neighbors for, as one man put it, "when somebody gets sick, everybody goes to visit him and to look after him." For quite understandable reasons, the living standards of rural Greece are far below those found in Athens or in most countries of the West. Consequently, health practices, many of them surrounded with superstitions, are the outgrowth of the experience of people who for centuries have faced pain, illness, and death without the benefits of the accumulated medical discoveries of the modern world.

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Indeed, for much illness the peasant has a supernatural rather than a scientific explanation. As one writer has put it:

> The whole of popular medicine is based upon the knowledge of charms and incantations. Many simples and drugs are of course known and employed; but it is still generally believed, as it was in the old time, that "there would be no good in the herb without the incantation." For the most ordinary diseases are

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1:Sanders Z-5/4 (1952-1959) 1962 EH1 Greece EH1

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feeling the mystery and fear that surrounds the whole discussion of the cause and cure of an illness attributed to the Evil Eye. As they grow older, they understand why the parent of a child or the owner of an animal will say in reply to any words of admiration: *Phryse* (Spit) or *Phrys' to* (Spit it), at which you must pretend to spit.

It is into such an atmosphere of half-truth, and even harmful customs, that those interested in scientific medicine must practice their profession. They quickly find that patients are often brought to them after the priest and the wise women have done their best and failed. They also know that merely giving a prescription is no guarantee that it will be followed as directed, but may even be blended with folk medicine that makes it ineffective. In Greece today there is one physician for every thousand people, a proportion usually considered adequate in the United States. The difficulty comes with their maldistribution, for over 50 percent of all doctors are concentrated in the Athens-Piraeus area. Consequently, many villagers have to travel long distances to obtain medical treatment, but the improved roads are making such trips less time-consuming.[15]

Once in a while some member of the family has to be hospitalized. An American, thinking only in terms of scientific sanitation concepts, is often amazed at what he observes if he chances into a small Greek provincial private hospital, one of which has been well described by Dr. Ernestine Friedl:

> One knocks on a door and enters a small room about twelve feet square. There are three ordinary iron bedsteads along three of the walls of the room. On each of the beds, fitted with her own bed linens in the typically varied colors of the Greek village, lies a woman patient. Two are older women wearing their brown kerchiefs and dressed in their own pink flannel nightgowns. The third is a young woman without a kerchief, lying on the bed fully dressed. It is not possible to move beyond the door because the entire center floor space is covered with a blanket, around the edges of which five relatives of one of the patients are sitting, just finishing a meal which they have been eating picnic-style. The remnants of bread, wine, and cheese are quickly gathered up as the relatives make way for the new visitors and apologize for taking up so much space. The husband of the young woman is warming some macaroni over a small kerosene burner on a tiny table near her bed. When the food is warm enough he serves it to his wife. The daughter and the husband of the third patient are standing near her bed watching the goings-on. The daughter coughs violently. It is midwinter and she has a cold aggravated by sleeping on a pallet on the floor of her mother's hospital room. A nurse comes in to leave an ice-bag. The daughter helps her mother to adjust it.[16]

Before one condemns too quickly such medical practices, it is well to try to understand some of the cultural factors which explain them. These have

1:Sanders Z-5A (1952-1959) 1962 EH1 Greece EH1

743 758 been pointed out by Dr. Friedl. The bedclothes from home give the patient a chance not only to show a part of her dowry but they, being familiar, lessen the unfamiliarity of the hospital. Human companionship is considered an absolute good. To be left alone by one's family, especially when one is sick, is dreaded.

> The family has especially important social and psychological functions in Greece. Therefore, the presence day and night of family members in the hospital fulfills the latent function of emotional support. Such support is essential for Greek patients, because they feel useless and unwanted whenever an illness prevents them from fulfilling their customary roles in the household. When the family members can also care for a patient in the hospitals much as they can at home (e.g., bring and cook food for him and, if necessary, even feed him) his sense of isolation and strangeness is further lessened.[17]

Then, too, the presence of relatives overcomes any doubt the patient may have about the doctor, for they can keep a check on him and discuss in constant family conferences the kind of treatment he is giving.

These are only some of the cultural influences surrounding hospital care. They have their advantages and their disadvantages, as Dr. Friedl points out, but they do show the pervasiveness of the family system and the fact that woman's role in medical care, even when a relative is in the hospital, is indispensable.

562 593 [369] Women in rural Greece today are conscious of their hard lot; they long for an easier physical existence, for their contacts with the cities have been frequent enough to show them the advantages of the conveniences there. At the same time, they are not discontented in their social relations. They observe that a man honors his mother and is solicitous over his sister's welfare; in the beginning, however, he behaves differently toward his young wife who is less experienced in the world than he and whom he must command if he is to retain the respect of his fellow villagers. Later on, his wife — though still observing the proprieties of deference and obedience — becomes almost his equal in many matters most essential to her. He consults her about the children or about any important shift in agricultural activity, although reserving for himself the final decision.

Rural Greeks would probably not see the intended humor in the sign once posted in an Alabama restaurant — "Keep your wife for a pet, and eat with us" — since the Greek peasant wife still maintains an indispensable economic role in addition to that of sexual companion and the bearer of children. Her chief security in a male-oriented society is her very indispensability, and the more dependent her husband is upon her, the greater her sense of satisfaction. To be merely a pet, even though this carried with it a lightening of physical toil, would threaten the very foundations of her

1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1
Kalivi, Attica

were fed to the threshing machine by the girls, who were wearing goggles and what seemed to be gas masks to protect them from the dust. The women also were wiring the bales of straw which were taken away to be stacked. The president of the community told me:

> Anyone who wants to work signs up. Every fifteen days we put on a new crew so that quite a few people are employed and paid. We do have to keep a small permanent crew on the job throughout the threshing season, which lasts about sixty days, but almost every family has a chance to get some benefit. We only do the wheat belonging to the people of our community. We determine by lot the order in which a family's wheat is to be threshed. All the people bring their grain here, for we can thresh it much more cheaply than they could do it with animals.

We then went into the large olive-pressing plant, built in 1948, with a loan of about $30,000 from the Agricultural Bank, and learned how this part of the cooperative's business was conducted. We learned that each family's batch of olives, like its wheat, was processed separately and that it gave 8 percent of the oil to the cooperative, which is a standard amount taken by presses over Greece, plus an extra 3 percent contribution until the machinery is paid for. After that, it will have to pay only 4 instead of the customary 8 percent. When I noticed an icon in the pressing plant, the manager said that they asked the priest in to bless their work at the beginning of the season. Another man in the company remarked, "we like our religion, but we don't like our priests," a comment with which the others seemed to agree.

The more I learned about this cooperative in Kalivi, the more I realized what a shrewd investment the pasture land had been. The cooperative accumulates no money for itself but reinvests all profits into public works or special funds as determined by the directors of the cooperative. For example, a doctor is paid out of a cooperative philanthropic fund in return for looking after the poor of the community free of charge.

In addition to this general cooperative, to which all family heads belong, there are in Kalivi five other cooperatives. First, there is the credit cooperative explained to me as follows: "Since many people here have to depend upon the Agricultural Bank for loans, the credit cooperative gets the money for them and they do not have to make the contact themselves. If a local peasant wants sulphur or insecticides, the cooperative gets all that is needed. The individual then owes the cost to the cooperative. He pays no membership dues. Both men and women belong." It so happened that the president and the secretary of the community, plus three other people, made up the five-man executive committee of this credit cooperative.

Second, there is a livestock cooperative which the owners of the five thousand sheep in the community support. The members number forty,

1:Sanders Z-5,4 (1952-1959) 1962 EH1 Greece EH1

634 through internal dissensions with the government group, which came to light a
661 week or two later on the replacement of the Minister of Interior among others and the secession of the Markezines group. It was a question of removal of antipatronage elements. The dismissals were legally contested, and subsequently several of the career nomarchs were restored to office. In late 1955 the reorganized government partly introduced legislation again re-establishing the career nomarchs.[11]

65 Whenever I found peasants complaining about their government, I asked them to list for me what services they received from outside the village. One of the men who had been complaining most vociferously in a Theban [369] village was somewhat startled at this request, especially after he had delivered himself of such eloquent sentiments as: "People in Athens live in paradise; here in our village they live in hell. The Athenians consider us slaves to work so they can eat." But he put his mind to the problem and said:

[793] What do we receive from outside? Well, our priest is paid by the government
[875] although we contribute something to the archbishop's funds; our teacher is paid by the government and they gave us a little for our school building, but we gave the materials and the labor. As for our roads, the villagers give their labor, break the rocks and put them in place, and then beg the government to help complete the road with machinery. The government engineer will come and supervise.

[625] Our field policeman, who watches to see that animals do not get into the growing crops, is paid from an independent treasury; our gendarmes are paid by the central government.

[759] The government does not provide us with medical care, for we have an ar-
758 rangement [*kondota*] whereby any family agrees to give forty-four okas of wheat to the doctor, and he comes when called during the year. This does not in-
[465] clude the cost of medicine. If you are not in this system, you pay for each visit. We have had this system a long time; it is deeply rooted. We used to pay our
[793] priest the same way, giving him twenty-two okas of wheat per family before the government took over his pay.

In this village, as elsewhere, we got conflicting opinions about the quality and usefulness of service rendered by the government, but there was a growing awareness that such services were available through the national government.

625 Once, on a return trip from Northern Greece to Athens, while we were
[124] having coffee in Levadeia in Central Greece, the commandant of gendarmes for that area asked if his wife and he might ride with us to Thebes. During the drive of less than an hour, we had a lively conversation on many points. I asked him about the young policemen or gendarmes whom we found in [701] every village and town. He said that most of them were fulfilling their military service, although as gendarmes they have to do a three-year rather

2:Friedl E-5 (1955-1959) 1963 EH1 Greece EH1
Vasilika

of the dowry. Rents are high and earnings relatively low in cities so that houses are a good investment. However, since building materials must be bought, and contractors paid, in cash, the houses may take many years to build. The young couple may then move into the habitable shell, and the rest of the dwelling will be completed out of the farmer's then current income. This kind of dowry-on-the-installment-plan becomes part of the marriage contract. It is often a source not only of continuing long-term discussions between a farmer and his town son-in-law, but also a source of quarrels—what in Greece are called *fasaries*.

The rate of movement of farmers' daughters into the towns and cities has been accelerating in the last decade, but marriages to urban husbands are not a new phenomenon. Between 1930 and 1950, at least five of Vasilika's women married "into Athens."

This type of marriage, like those discussed above in which both bride and groom are members of farm families, accelerates land sales and exchanges. The network of association which develops between Vasilika's residents and their relatives in Athens and the towns, is, however, perhaps the most important consequence of the urban marriages of village women (Friedl 1959a). In addition to the economic reasons for continuing relationships, there are several customary patterns which increase the frequency of contacts between the two groups. Lonely village mothers are grateful for visits from their married daughters and their grandchildren, and the midsummer season not uncommonly finds city women with their children back in the village visiting their parents, often for as long as a month or two. A return to one's village for Easter, sometimes for most of the Holy Week as well, is a well-known pattern in Greece. *Paniyiri* in one's *patridha* (home village) is another occasion for visiting.

Journeys in the opposite direction also occur with some frequency. Village men and women, when ill, may enter hospitals in a town in which they have sons or daughters, or brothers or sisters. Village men visit their town brothers and bring their children; occasionally a child spends a summer with his town aunt or uncle. Visits to the village or to the town usually last several days. They are made possible by still another congruent pattern of Greek culture. Neither the villagers nor their town relatives seem to have any strong need for personal privacy. Visiting relatives are bedded down on pallets when there are not enough regular beds, and it is not considered either indecent or especially uncomfortable for one or even two families to sleep in the same room. It is through this intervisiting process that so many urban traits of culture are introduced to the villagers and, indeed, that some village patterns are conserved in urban areas.

An additional consequence of the town marriages of village girls is that rural wealth derived from land flows into the cities. This wealth is an addition to what the productivity of land normally contributes to urban centers in the form of food, taxes, and the export of rural produce. A portion of the farmer's profits, through the dowry, is being used, it would seem, directly to support a part of the urban population. When the dowries are invested in housing or in small commercial enterprises, many low-salaried employees, civil service workers,

2:Friedl E-5 (1955-1959) 563 EH1 Greece EH1
Vasilika

relatives who are, of course, automatically acquired by birth. Certainly this is a real distinction between the affinals and *kumbari*, on the one hand, and consanguineals on the other, but, in Vasilika at least, it is not a difference of preponderant functional importance. In practice, any significant relationships established even between consanguineal kin outside of the elementary family are voluntarily arranged, and this element of the situation is more important than is the fact that the pool of blood kin from whom a man or woman can make the choice is predetermined.

Let us summarize the situation this way: A man and his elementary family can normally provide all the personnel needed for the year-round functions on his farm. At peak periods the farmer hires the necessary additional labor. However, from time to time he may need temporary help. He may need an extra horse for plowing, or he may want to join with someone to fill a truck with grain for a trip to the mill or with cotton for a trip to the gin; or he may need an extra hand or two to string tobacco or to separate cotton from the pod, or he may want someone to help with irrigation, or he may wish to join with another family for the Easter feast. For both giving and receiving assistance of this kind, Vasilika's farmers seem to consider all the village's inhabitants, kin or non-kin, *kumbari* or non-*kumbari*, neighbor or non-neighbor, as almost equally suitable candidates. A farmer may choose one non-neighbor villager who has a good horse, and exchange plowing assistance with him, a next-door neighbor with whom he joins in sending grain to the mill, a village sister to help with tobacco stringing to whom he gives a bottle of wine or the like in return, and so on. Moreover, none of these arrangements is necessarily permanent; the personnel may vary from year to year and from season to season. Indeed, shifting relationships of this kind are more common than permanent ones. From our point of view, the significance lies in the fact that whether or not kin are involved, the type of association is the same.

There is one notable exception. No matter how valuable assistance might be, it is not sought after if the individuals capable of rendering it belong to a family with whom there is an acute, even if temporary, disagreement. For example, although one of the village girls was adept at giving penicillin injections, a woman from a family which was on bad terms with that of the girl preferred to leave the village for a week to live with a town relative who was also capable of giving the injections. The trip was inconvenient for the ill woman's family, and since she was not fond of her relative, the visit was actually distasteful to her. But neither of these considerations was compelling enough to have her choose what in her and her family's opinion was the worse alternative—to ask assistance from a village family with whom they were currently in acrimonious rivalry. Feuding of this kind can occur among kin as well as among neighbors.

Apart from the agricultural production cycle and other predominantly village-centered activities, Vasilika's farmers need help in arranging marriages, in educating their children, in finding employment, in dealing with government officials and with merchants to whom they sell their produce. They also want some urban associations simply for prestige, and to provide a place to stay if they visit towns and cities. For these extra-village purposes, a farmer is more likely

3:Friedl E-5 (1955-1956) 1959 EH1 Greece EH1
Vasilika

ambivalence that is usually found in mobile societies between participants in different levels of culture and occupants of different prestige and power levels in the social structure. I do not suggest a relationship entirely free of suspicion or jealousy, but there is considerable evidence that the villagers take substantial pride in the very fact that their urban kin have a social position of greater prestige. The latter often view their country relatives with no more than a mildly paternal condescension. Charges of urban snobbishness on the one hand, and of peasant crudeness on the other, are usually reserved for those outside the circle of one's own kin.

The line of urban cultural influence, then, runs something like this: New ideas and attitudes, and changes in style of life, are brought to the notice of a village family by its urban relatives. However, if a village household adopts at least some of the new traits, it is only partly because of the respect which it pays to its urban kin. A more powerful influence is often the strong sense of competition which the rural household feels toward other village families, on which it hopes to score a point by showing superior sophistication. Those village families which have no urban relatives gradually try to copy the behavior of those which do. Some degree of urban influence stemming from urban relatives of villagers therefore penetrates the entire village community.

Such competition for prestige often encourages spending beyond the boundaries of economic wisdom, quite on the "keeping up with the Joneses" pattern. So the resources of the villagers may be used for elegant urban-style clothes which are attractive at Easter but are soon afterwards worn for ordinary work. A lightweight wool dress, for example, is unwearable in a few months after having been washed several times in hot water and pounded with a paddle to release the soil and other dirt which clings to it. The same sort of thing holds for men's shoes. They are standard city shoes which are worn for heavy farm work throughout the year with no boots or other protection from the weather. However, it is also significant that the imitation of urban styles accounts for other kinds of innovations. For example, it has become fashionable to build new-style privies which are an improvement on the sanitary facilities in the village. The new type has a concrete floor which slopes down toward a center hole, or has a specially made ceramic fixture incorporating the slope and center hole, instead of movable wooden floor boards arranged to leave a space in the center—or, of course, no privy at all. There is also a new fashion in the building in which such facilities are housed. If possible, it will now be constructed of brick rather than of wattle and daub or of reed. To give another instance, the imitation of urban styles has also undoubtedly contributed to the increasing willingness of the villagers to be hospitalized for serious illness (Friedl 1958).

The description of continuous face-to-face contact with village relatives given in this paper holds well for at least the generation that has itself left the village, and for its children. The grandchildren of those who left the village for the towns will, when they become adult, make fewer visits back to the village, and the ties of association between country and city relatives gradually loosen with the passage of time. But, since social mobility is a continuing phenomenon

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Hospital Care in Provincial Greece

*Ernestine Friedl**

Introduction

The rural population of the province of Boeotia in Greece now makes considerable use of hospital care for childbirth and for serious illness.[1] Both men and women, even those of the older generation, allow themselves to be hospitalized without objection, often, indeed quite willingly. This is a new phenomenon. It is a particularly interesting one because of the many psychological and practical obstacles in the way of the hospitalization of a Greek village patient. Traditionally, there has been a tendency to view hospitalization as a form of desertion of the sick person by the members of his family.[2] Transportation to and from the villages to the provincial town in which the hospitals are located is difficult and expensive. Besides, doctors' bills and hospital costs themselves are quite high by local standards.

Anthropologists have long been interested in the problem of introducing hospital care in rural regions where scientific medicine is not part of the culture. They have also studied attempts to improve the use of scientific medical facilities in cultures where science is known, but is only sporadically utilized by the rural population.[3] In either situation anthropologists regularly record the many difficulties encountered. The analysis of the reasons for the difficulties has resulted in the enunciation of certain principles, which may be summarized as follows: beliefs and practices associated with curing illness in any culture have important latent functions both for the personality of individuals and for the operation of the social structure. In other words, to maintain or to restore physical well-being is the manifest purpose and often

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2. Margaret Mead, ed., *Cultural Patterns and Technological Change*, UNESCO, 1953, p. 250.

3. William Caudill, "Applied Anthropology in Medicine," in *Anthropology Today*, A. L. Kroeber, ed., Chicago, University of Chicago Press, 1953, pp. 771-806; Alexander H. Leighton and Dorothea C. Leighton, *The Navaho Door*, Cambridge, Harvard University Press, 1944; Margaret Mead, *op. cit., passim*; Benjamin D. Paul, ed., *Health, Culture, and Community*, New York, Russell Sage Foundation, 1955, see especially pp. 31-34, 139, 231, and 241.

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Hospital Care in Provincial Greece

*Ernestine Friedl**

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the result of curing practices, but the means used depend upon and have some consequences for the economic, religious, and social organization of the society, for its belief systems, and for the psychological characteristics of individuals.[4]

Studies analyzing the social roles involved in illness and of the nature and extent of hospital care in the United States have led to the same conclusions.[5] Therefore, in the interests both of successful therapy and of humanity, it is usually recommended that scientific knowledge about illness and the practices associated with its cure be introduced in such a way as to take account of the latent functions of the indigenous behavior. But how practically to implement this recommendation is always a problem.[6]

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The Boeotian situation, to be sure, did not result from conscious planning along the recommended lines. It is here suggested, however, that this situation provides, in certain respects at least, the virtual equivalent of a case study in the successful operation of the recommended principles. The following description is presented with this in mind, and does not purport to be in any sense a total study of illness in the society described.

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Comparison of Home Care and Hospitalization

Let us first look at the treatment of illness in a Greek village home. Much as in the United States, the first day or so of fever or other sign of illness is treated with bed rest and home remedies. Aspirin is known, and in the Greek village of 1956 penicillin and other antibiotics are sold in the village store, and their use comes under the head of home remedies. But, significantly enough, the antibiotics will be administered only if some relative of the family (not necessarily a physician

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4. For a discussion of manifest and latent functions see Robert K. Merton, *Social Theory and Social Structure*, Glencoe, Illinois, The Free Press, 1949, pp. 21-81. See also A. H. Leighton and D. C. Leighton, *op. cit.*, and B. D. Paul, *op. cit.*, pp. 460, 477; also Lyle Saunders, *Cultural Difference and Medical Care: The Case of the Spanish-Speaking People of the Southwest*, New York, The Russell Sage Foundation, 1954.

5. Lawrence K. Frank, "Psycho-cultural Approaches to Medical Care," *Journal of Social Issues*, 8, 45-55 (1952); Talcott Parsons, *The Social System*, Glencoe, Illinois, The Free Press, 1951, pp. 428-479; Talcott Parsons and Renee Fox, "Illness, Therapy and the Modern Urban American Family," *Journal of Social Issues*, 8, 31-44 (1952); Leo W. Simmons and Harold G. Wolff, *Social Science in Medicine*, New York, The Russell Sage Foundation, 1954, pp. 170-193.

6. George M. Foster, "Relationships Between Theoretical and Applied Anthropology," *Human Organization*, 11 (3), 5-16 (1952); B. D. Paul, *op. cit.*, p. 476.

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or nurse) has been taught how to give injections and can be called upon to do so. If the doctor who travels on horseback through the countryside should come into the village on a day when anyone is ill, he may or may not be asked to look at the patient. A case of measles in a young child, for example, would be diagnosed by the family and they would feel no need for the services of a doctor. In the meantime, members of the family who live in the village and the neighbors will visit with the patient while his household continues in its usual activities. However, the patient is never left alone, and is often surrounded by a crowd of noisily talking visitors, including children. The visitors all give advice as to proper treatment, recommend doctors in the neighboring towns, and recall the history and development of similar symptoms in themselves or in their relatives. The proper phrase of good cheer is *perástiká sas* which means "may it pass for you" and is addressed not only to the patient himself but to his entire household. Nor is the patient isolated even at night. If the household is one in which the parents and children sleep in the same room (some on beds and some on pallets on the floor) this custom is not changed because of illness. Food for the patient is prepared by whatever member of the household customarily does the cooking.

If an illness lasts beyond expectations, or if it takes acute or violent form such as a heart attack or a bleeding ulcer, several alternatives are possible. Some member of the household may go for a doctor, or the patient may be taken to a hospital in a provincial town. Going for the doctor may involve a walk of several miles to the nearest town where there is one, or it may involve a walk to the nearest town or village that has a taxi, and the taxi may be hired to go on for the doctor. The taxi may also be hired to call for the patient and to take him to the hospital. Ordinarily, the patient is accompanied by at least one member of his household and frequently by several. In one case in which a woman in labor went to the hospital, she was accompanied by her mother-in-law, her husband, her sister-in-law, and her brother.

One of the provincial towns in Boeotia is slowly developing into a small medical center for the surrounding region. The hospitals there are actually small proprietary institutions with ten to twenty-five beds. Each hospital is owned and operated by a doctor who ordinarily has a specialty. There are several maternity hospitals, one or two for major surgery, one for tonsilectomies, one for internal medicine, and so on. The number of these small private hospitals has increased sharply since the end of the Greek civil war in 1949. They are staffed by local women and young girls, who ordinarily have no special nurses' training except for what training the doctor can give them. The physicians themselves, however, are graduates of the medical school of the University of Athens, and many have had additional training outside of Greece.[7] The qualifications of the physicians lead one to expect normal American hospital routines, perhaps somewhat modified by the limitations of space and of an untrained staff.

But consider the scene in the room of a small private hospital. One knocks on a door and enters a small room about twelve feet square. There are three ordinary iron bedsteads

7. Leland G. Allbaugh, *Crete: A Case Study of An Under-Developed Area*, Princeton, Princeton University Press, 1953, pp. 156-157.

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along three of the walls of the room. On each of the beds, fitted with her own bed linens in the typically varied colors of the Greek village, lies a woman patient.[8] Two are older women wearing their brown kerchiefs and dressed in their own pink flannel nightgowns. The third is a young woman without a kerchief, but lying on the bed fully dressed. It is not possible to move beyond the door because the entire center floor space is covered with a blanket, around the edges of which five relatives of one of the patients are sitting, just finishing a meal which they have been eating picnic-style. The remnants of bread, wine, and cheese are quickly gathered up as the relatives make way for the new visitors and apologize for taking up so much space. The husband of the young woman is warming some macaroni over a small kerosene burner on a tiny table near her bed. When the food is warm enough he serves it to his wife. The daughter and the husband of the third patient are standing near her bed watching the goings-on. The daughter coughs violently. It is midwinter, and she has a cold aggravated by sleeping on a pallet on the floor of her mother's hospital room. A nurse comes in to leave an ice-bag. The daughter helps her mother to adjust it.

If we were in a maternity hospital, the scene would be much the same, except that several infants would be sleeping in wooden cradles in the rooms with their mothers. If cradles had not been brought from home, the infants would be lying in the beds with their mothers. A female relative of the mother will have been present during the birth of the baby. She will have held the mother's hand, sponged her off during the worst of the pains (no anaesthetic is used), and will have comforted her with soothing words.

These hospital scenes and the patterns of hospital care they represent suggest a remarkable similarity between the treatment of illness at home and its treatment in a hospital. The same values and attitudes of Greek culture are demonstrated in both situations, and their reinforcement in a time of stress is not impeded by hospitalization.

Influence of Greek Culture

Greek villagers take great pride in showing-off household possessions. Bed-linens and coverings are of special importance, because they are a part of the dowry which the woman of the household provided at marriage, and she probably wove them herself. Sleeping on bedclothes from home, therefore, not only lessens the unfamiliarity of the hospital surroundings, but also may give the patient and his family a chance to show off the handiwork of the women.

Let us now turn to the crowded conditions of the hospital room. Human companionship is believed by the Greek villagers to be an absolute good. Solitude is considered very unpleasant and is avoided even when people are perfectly well. When someone is in the vulnerable state of illness, it is especially important that he not be left alone. In the hospitals the members of the patient's family take turns staying with him, and neighbors who happen to be in town come and visit. Some of the hospitals, to be sure, provide a special room in

8. A DDT campaign after the Second World War successfully eliminated vermin from the Greek countryside. There is, therefore, little danger that the bedding from home will bring vermin into the hospital.

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which relatives can sleep. Even so, however, since private rooms are apparently unknown, there are always other patients to talk to.

The family has especially important social and psychological functions in Greece. Therefore, the presence day and night of family members in the hospital fulfills the latent function of emotional support. Such support is essential for Greek patients, because they feel useless and unwanted whenever an illness prevents them from fulfilling their customary roles in the household. When the family members can also care for a patient in the hospitals much as they can at home (e.g., bring and cook food for him and, if necessary, even feed him) his sense of isolation and strangeness is further lessened.

A characteristic attitude of the Greek villager is a suspicion of other people's motives and actions.[9] He believes that people are not trustworthy and are more likely to cheat one than not. The opportunity for constant family conferences to check on the doctor's treatment of one's illness is considered a necessity. Once again, the presence of at least one relative at all times during a hospital stay assures the patient that he has someone nearby watching out for his interests and keeping an eye on the possible chicaneries of the doctors and nurses. A physician we interviewed mentioned as one of the reasons for permitting a relative to stay with a woman throughout an entire confinement, the fact that the visitor could then act as a witness. She would be able to testify to the new mother and to the other members of the family that the doctor had done his job properly. The doctor himself did not seem to feel that such a point of view reflected in any way on his integrity, but simply took it for granted.

Pros and Cons of Hospitalization

What, then, are considered the special advantages of hospital care which impel the Greek villagers to incur the great expense and inconvenience of hospitalization? There is, of course, recognition of the fact that the doctor is almost continually on call in the hospital and the added sense of security this brings. For childbirth, there is no question but that the villagers believe that the doctor will do a better job. He knows more than the midwife and professional knowledge and skill is highly valued. But, I believe, what is of commensurate importance is the latent function hospitalization fulfills in the perpetual rivalry for prestige among village families. Hospital care is believed to be the sophisticated, urban way of caring for serious illness and childbirth. Hospitalization therefore can enhance family prestige. It is not uncommon for one or two sons of a village family to be educated sufficiently to obtain a white-collar job in a provincial town, in Athens, or even to be educated for and to practice one of the professions. The village girls, whose fathers can provide large enough dowries, marry a city or a town man whenever they can and so acquire husbands who are not village farmers. Since, in Greece, the family continues to act as a unit for some purposes even though its members are scattered over the city and several towns and villages, the

9. Harry L. Levy, "Property Distribution by Lot in Present-Day Greece," *Transactions of the American Philological Association*, 87, 45-46 (1956).

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urban members of the family regularly visit the villages. They have high prestige and are strong advocates of urban ways. They stress the superiority of urban and town doctors over the doctors who travel through the countryside on horseback to treat the villagers. If urban or town doctors are to be consulted during an illness and their care is then needed, hospitalization is the only answer. The result is that childbirth and the care of serious illness at home has come to be associated with low social position and low income, hospital care with high social position.

This description of hospital care would be incomplete without some more detailed discussion of the specific disadvantages of such care to the villagers. The expense is a major element not only because cash is scarce and long hospitalization may use up savings; indeed, it sometimes requires the sale of land. It has importance also just because the payments are made in cash, and cash must be saved by the Greek villagers for a daughter's or a sister's dowry. Every time the family's economic resources are used for other purposes it delays the marriage of the daughters. This causes considerable anxiety and leads to some sense of guilt on the part of the patient, and of resentment, not always suppressed, on the part of the family. A less acute, but nevertheless, real disadvantage of hospitalization is the increased burden of work it places on those left at home. This also occasions guilt feelings on the one hand and resentment on the other. Finally, the necessity for dealings with doctors and nurses adds to the number of role relationships which the villagers regard with suspicion. The family, in its own view, is therefore confronted with yet another occasion in which there is a threat of loss of *filótimo* (the Greek version of the oriental "face"). Constant vigilance, they believe, is necessary to see to it that the hospital personnel do not succeed in outsmarting the village family. All of these disadvantages are consequences of serious illness, in any case, but they are much intensified by hospitalization.

The evidence indicates, however, that these anxiety-producing consequences of hospital care are substantially outweighed by what are consciously and unconsciously felt to be its advantages. However, I believe that without the compensating sense of familiarity and continued participation in family relationships which the small Greek hospitals afford, the disadvantages of hospitalization would be overwhelming.

Attitudes of the Doctors

What is the attitude of the scientifically trained doctors to the hospital conditions described? They are well aware of the fact that their hospitals do not conform with the standards they observed in Athens and in other urban centers. Some of our doctors were apologetic about their own small institutions. They complained about the inability to keep regular consulting hours and the fact that therefore patients were constantly overflowing the waiting rooms. They said, however, that there was no help for it, because the villagers could not possibly manage to get into town at any regular times. They also complained about the many relatives in attendance on their patients, and said they sometimes got in the way. They pointed out, however, that their patients were uneducated villagers for the most part and would be too miserable under any other conditions. Being Greeks themselves, they were,

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in characteristically Greek fashion, more human-centered than science-centered. They went along with the human necessities of the patients, allowing these necessities to overshadow, for a time at least, what they regarded as the strict requirements of scientific hospital management.

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Moreover, conversations with the doctors indicated that, although they were far more sophisticated than their village patients, they were nevertheless participants in the same basic culture, and shared many attitudes and expectations with their patients. For example, the lack of regular time scheduling for consultation, rounds of the wards, nursing routines, and the like, is not likely to be as personally irritating to a Greek doctor as it might be to his American counterpart. Greeks actively dislike regularity, and, unlike many Americans, do not derive comfort and security from routines. The Greek doctors are also less likely to be disturbed by the presence of the large numbers of visitors and their, to Americans, relatively boisterous conversations. Long and animated consultations before any decisions are made form a part of Greek life to a greater or lesser degree at all social levels, and conversation for its own sake is a favorite recreation. The fact is that illness and quiet are not inextricably linked concepts in Greek culture.

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What the Greek doctors are apparently unaware of, however, is the extent to which their, to them, makeshift hospital practices conform to the social scientists' recent recommendations for flexibility and for adaptation to traditional methods of handling illness. What careful analysis has pointed out as a desirable method for conscious, planned, and gradual change,

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has been evolved willy-nilly by these doctors under the diverse pressures of their complex culture.

Future Development

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This is not to say that Greek provincial hospitals will continue their present practices indefinitely. The fact that urban hospitals conform more closely to previously existing American standards and that these form the ideal for the Greek doctors has already been noted. What is even more interesting is that, as the villagers become familiar with hospital care, in the provinces, they are sensitized to the reports of their urban relatives about hospital conditions in Athens. They are told that these more modern institutions provide bedding, and serve food from hospital kitchens. They, themselves, have learned that bringing food from home, and cooking in the hospital, are severe drains on family energies. The result is that they are beginning to complain about the poorer facilities of the provincial hospitals, and are talking of demanding more services: services which, had they been forced upon them in the early stages, would have made the hospital a strange and repellent place.

One may hope that the development of hospital practice in Greece does not reach the heights of impersonality and isolation of patients characteristic of the majority of our own hospitals. There is a growing literature analyzing and sometimes criticizing these aspects of American hospital care.[10]

10. See e.g., L. W. Simmons and H. G. Wolff, *op. cit.*, and L. K. Frank, *op. cit.*

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to fight the disease after it appeared rather than to cure the source of the disease. 744

The main causes for the death of children were the irregular feeding, intestinal diseases, malaria, lack of nutritive food and long hours of work of the parents that caused them to neglect their children. 164 165

Due to the cost of medicine the people called the doctor only when it is too late for him to do anything. "It was the will of God to give and take." This is the usual answer that one would hear. The cost of medical bills range from $12 to $35, even though the local doctor is free of charge. 758 [777] [511]

/43/ The care of the aged rests solely on their sons. According to tradition the aged are the head of the family until they die and due care and respect should be paid to them so as to get their blessings before their death. The aged who are unable to do any kind of work are cared by their closest relatives. It is a part of their religious duties to respect and care for the aged. 888 593

PART III.

Earning of Living. The farming is a subsistence type of farming. The people barely make their living and on lean years they have to borrow heavily from the Agricultural Bank or from the local city merchants. The following inventory which was taken from a representative farmer shows more or less the farm enterprise. 241 511

Inventory at the beginning of the year. 511
176 drachmas = $1 1 Oke = 2.82 pounds. [436] [804]

A. Condition of the family.
Members of the family 4 - 2 females and 2 males.
Members below 14 years of age 1, above sixty none.

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Medical care. The only village in the area that has the best medical service is Megali Vrisi. The efforts of the nurse and the doctor slowly are gaining ground and more and more the people follow their principles of caring for the sick. The newly-erected hospital in the nearby city of Kilkis provides care for the inhabitants of the area free of charge. If the patient is very sick he usually is taken there, where he can find specialized doctors. 758 ● 759 [178] [743]

The construction of the living houses is so poorly done in the village that the care of the sick under such conditions is hard. The windows are small and the mud floor with severe cold winds of the winter and no proper fuel to warm the house makes it harder yet to care for the sick. 758 362

The mutual assistance of relatives in sickness as well as of neighbors is great. People at times of /66/ great difficulties help each other, not only through labor but by giving each other food and even money. Especially is this characteristic of this people to share alike each other's burdens and partake actively in their grief and sorrow. 758 476 621

The Faith Healer. People of experience and cleverness perform certain magical performances that convince the people of their ability to command the spirits. Most of the inhabitants of Megali Vrisi believe them and spend money and time to visit them. People suffering from chronic diseases, or if born with defects of the body, or if unable to bear any child, find as the answer to their discouraged condition the faith healers. 755 [842]

Some Saints who perform miracles for donating to them; a lamb, a hen, a goat, or a cow, may, in return, act favorably for the patient. Priests praying for the sick or for the crippled are not uncommon. On special holidays, certain churches fill up with such sick and crippled people. Some sleep in the church for weeks without food and pray continuously to the Saint. Stories circulate that some one saw the Saint riding on the horse, are very common. Sometimes these saints actually do heal in directly local pains, even of the partly crippled. Even doctors 755 782 776 [793] [787]

he worships her like the Virgin. A derisive Dodecanese anti-Mussolini song, composed during Italian occupation, makes casual reference to God and the beloved Virgin of the Island.

HEALTH

The stock phrase for beginning a Greek letter is "We have health and health we wish for you." A frequent form of greeting and good-bye is "Health to you", and this is also said to anyone who sneezes. Anyone wearing a new article of clothing is greeted with the wish that he wear it with health. The question "How are you? Are you well?" asked upon a meeting with someone, are real questions, requiring an answer. Health is good and important, it is desired, but it is not a preoccupation. The wish for health is not a sanction; one of the child care manuals uses this sanction in urging mothers not to let their young children play with the neighbourhood children for fear of contracting infections, but the other urges the mothers not to worry about microbes, since association with others is of primary importance. In general, however, health is not a motivation in nutrition, recreation, or housing. And human relations are definitely more important. It is terrible to send a member of the family to the hospital unless, of course, it is necessary for an operation. Because of this attitude, tuberculosis often spreads through the family, since very often not even the barrier of self-protection will be introduced between the ailing and the well. Added to this is the fear that, if tuberculosis is known to be in the family, it will be hard to get a son-in-law. However, if an operation is required, a woman will go alone from a village to a hospital in Athens. There is no rejection by her family involved here; in addition, the pattern of fortitude is evoked.

In general, people do not go to a doctor unless something is very wrong. They do not go for a general check-up, although the habit of going to maternal and well-baby clinics is gaining ground. If anyone is unwell, home remedies are first resorted to, and probably the wise woman who knows about herbs is called in. The manuals on child care have long sections, covering about a third of the book, on home care and the diagnosis of disease; and they urge the use of traditional remedies: cupping, the use of camomile and other herbs. When a serious illness is recognized, the doctor is called and vows are made to the Virgin or the appropriate Saint; a mother may vow a foot pilgrimage, or 40 daily obeisances over a period of time, or the gilding of the hands of an ikon. Much illness arises from the evil eye or magic spells, and can be counteracted by magical practices.

The tuberculosis division of the UNRRA mission to Greece reports the impression that there was only one half the amount of tubercu-